



**To:** The Hon. Therese Murray, Senate President  
The Hon. Salvatore DiMasi, Speaker of the House  
The Hon. Robert Antonioni, Co-Chair, Joint Committee on Education  
The Hon. Patricia Haddad, Co-Chair, Joint Committee on Education  
The Hon. Robert DeLeo, Chair, House Committee on Ways & Means  
The Hon. Steven Panagiotakos, Chair, Senate Committee on Ways & Means  
Leslie Kirwan, Secretary, Executive Office for Administration and Finance  
Dr. Dana Mohler-Faria, Special Advisor for Education, Office of the Governor

**From:** Ann Reale

**Re:** FY2008 Legislative Report

**Date:** March 4, 2008

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Attached you will find a report of activities of the Department of Early Education and Care this fiscal year to date, which fulfills the reporting requirements outlined in line-item 3000-1000 in the FY08 General Appropriation Act, as well as MGL Ch. 15D(3)(e).

I hope you take as much pride as we do in the fact that the Commonwealth of Massachusetts continues to be recognized for the pioneering work we are doing to build a truly comprehensive state system of early care and education and out of school time. More than just a merging of departments or a consolidation of existing programs and initiatives, we have engaged in a more revolutionary top-to-bottom rethinking of how to orient services for children. And it began with a fundamental shift in our approach – instead of asking families to navigate a bewildering alphabet soup of state agencies, we are asking how we can build a system that is responsive to families' needs and produces positive educational outcomes for their children.

An excellent example of this comprehensive, family-focused system, which you will learn more about in the enclosed report, is the implementation of our new, comprehensive information technology system. This is much more than just a technical upgrade...it represents a critical milestone in our work and the culmination of many years of effort to build a comprehensive system that serves the needs of families.

Building on the progress of our first, formative years as an agency, we now move into the next phase of our work, which is focused on a strategic framework of three interrelated and reinforcing paths: (1) supporting the excellence and quality of programs and providers, (2) increasing and improving parent awareness, affordability and access, and (3) establishing a thriving statewide system that is essential to strengthening and supporting these first two strategies.

This report is just a brief summary of our efforts, but I hope it is a helpful update on our work. Please do not hesitate to contact me with any questions. Thank you, again, for your continued patience with, and support of, EEC's efforts.

## **Department of Early Education and Care (EEC) Comprehensive FY2008 Report**

This report was prepared to fulfill the reporting requirements outlined in line-item 3000-1000 in the FY08 General Appropriation Act, as well as MGL Ch. 15D(3)(e). Information and updates are provided on the following EEC initiatives and efforts:

- 1. Workforce and Professional Development**
- 2. Alignment of "Rates" and Quality Standards**
- 3. Universal Pre-Kindergarten (UPK)**
- 4. Supporting National Accreditation**
- 5. Promoting Positive Behavioral and Mental Health in Early Education and Care**

### **1. Workforce and Professional Development**

The Massachusetts Department of Early Education and Care (EEC) provides and coordinates a range of services and assistance to improve the quality, affordability, and accessibility of early education and care and afterschool programming in the Commonwealth. Included among these services are professional development opportunities for professionals in these fields, who serve more than 275,000 children each day. Research shows that a highly skilled and well-qualified workforce is a critical factor in the quality of an early education or out-of-school time program, and that quality programming is linked to positive outcomes for children. Currently, EEC administers professional development through a variety of formats and agencies including, but not limited to, the following:

- Contracted services with regional Child Care Resource and Referral agencies (CCR&Rs);
- Professional Development Grants for Community Partnerships for Children (CPCs);
- Early Educator Scholarships;
- Child Development Associate (CDA) Scholarships;
- Quality Improvement Grants;
- Building Career Grants to Institutions of Higher Education; and
- Special Education Allocation Grants.

EEC is developing a statewide network of workforce resources comprised of coordinated and integrated professional development services that are aligned with the needs of the early education and care and out of school time workforce and link directly with Higher Education. These efforts are guided by EEC's **2007 Workforce Development Report**, which is required by MGL Chapter 15; Section 5D (see <http://www.eec.state.ma.us/docs/2007WorkforceReport%206.6.07.pdf>).

The report provides an update on EEC's work over the previous fiscal year to develop a statewide professional development system for the early education and care and out of school time workforce and identifies the following five essential elements:

- 1) Statewide infrastructure building, leadership, and strategic planning;**
- 2) Core competencies;**

- 3) **Professional development data management system;**
- 4) **Credentialing and career lattice (career pathways); and**
- 5) **Professional development opportunities and resources aligned with requirements and workforce needs.**

The report also identifies 10 key next steps to be accomplished in FY08 (see page 12 in the Report). We are pleased to inform you that we are on target to accomplish these goals. Here is a highlight of our progress-to-date:

- EEC increased its internal capacity by adding two specialists whose primary responsibilities are workforce development. EEC also hired an Associate Commissioner for Program Quality which allowed an existing Associate Commissioner to focus entirely on workforce development rather than managing both units.
- In July 2007, EEC, in collaboration with the United Way of Massachusetts Bay and the Merrimack Valley and the Schott Fellowship, convened the **Early Education and Care and Out of School Time Workforce Development Task Force**. The Task Force has been meeting monthly and will provide EEC with its actionable recommendations in four critical areas in June 2008:
  - Articulation and transfer agreements among institutions of higher learning;
  - A final set of core competencies based on more than a year's worth of internal/external research on the work of other states and emerging best practices;
  - An orientation for all staff entering the field; and
  - Developing a career lattice and credentialing system.
- EEC is concluding its research on the workforce registries in other states and will integrate the initial development of its **Professional Development Data Management System** into the implementation of the agency's comprehensive information technology system (see below). In the proposed regulations for family child care homes and center-based programs currently under development, EEC will require annual registration by every individual working in early education and care settings. EEC anticipates that the new regulations will go into effect in the late fall of 2008, providing a mechanism to gather valuable, new data on the size and composition of the workforce.
- During FY08, EEC worked diligently to facilitate collaboration and communication between our higher education partners in the Building Careers Program, and our two largest providers of professional development services – Community Partnerships for Children (CPCs) and Child Care Resource and Referral (CCR&Rs) agencies. This work is critical to building a coordinated statewide system of workforce development that maximizes resources, ensures service to all geographic areas, and functions effectively at the local and regional levels. EEC developed common goals and priorities for FY08 professional development funds administered by CPCs and CCR&Rs. EEC also required greater collaboration with colleges in the **Building Careers** program and instituted parallel accountability requirements. These measures will allow EEC to better understand provider roles,

the strengths of the existing system, and where critical investments need to be made.

CPCs and CCR&Rs are working both individually and together, as well as with the Building Careers Colleges to achieve the following objectives in FY08:

- Increasing the workforce's access to a wide spectrum of diverse, high-quality, and meaningful professional development;
- Providing professional development that is based on core competency areas;
- Encouraging partnerships and broad-based planning efforts that leverage resources;
- Supporting the transition of educators to degree granting institutions as they develop professionally; and
- Developing a statewide calendar of professional development opportunities.

Our plan for FY09 and beyond is to connect Building Careers, the Early Childhood Educators (ECE) Scholarship program and professional development offered by the CPCs and CCR&Rs to define a career map that takes the workforce from Adult Basic Education (ABE) and English for Speakers of Other Languages (ESOL) classes, to CEU training, and ultimately, to college courses and degrees.

## **2. Alignment of "Rates" and Quality Standards**

EEC has taken several steps over the past two years to begin effectively aligning the rates paid to our providers of subsidized early education and care services to the standards EEC uses to ensure quality programming. These include:

### Provider Cost Study:

EEC is committed to creating a system of high-quality early education and care and after school services that is accessible and affordable throughout the state. While parents' ability to pay creates a market price, this price may not meet the cost of providing these services. With this concern in mind, EEC commissioned Ann D. Witte Consulting to conduct the Massachusetts Provider Cost Study, which sampled approximately 1,000 family, group and school-age programs across all age groups. The study assessed the cost of delivering these services throughout the state and compared these costs to regional market prices and various measures of quality, e.g., accreditation, teacher education, and teacher experience. The final results of the study will be used to inform the development of the Quality Rating and Improvement System (QRIS) and the development of an alternative structure for setting provider reimbursement rates.

### Quality Rating and Improvement System (QRIS):

EEC's Universal Pre-Kindergarten program has taken bold steps toward defining quality indicators in preschool programs, which has helped set the stage for the development of the QRIS.

EEC has contracted with Oldham Innovative Research to develop the QRIS, which can be a powerful tool in supporting programs and providers to reach higher levels of quality. The process of developing this system, which will take place over the next several

months, began in early February 2008 with presentations to EEC staff and the EEC Advisory Team. At these meetings, Anne Mitchell, a nationally recognized expert on QRIS models, provided an overview of QRIS structures being used in other states, what the field has learned about impact on program quality, and key components and issues that the Department should consider in developing a successful model for Massachusetts.

A QRIS development work plan is being developed which addresses how reimbursement rates can be aligned with quality standards, and incorporates input on the QRIS design from EEC staff as well as families and stakeholders. By July of 2008, we expect this collaboration to identify key elements for the Department to consider in developing a model that works for the Commonwealth.

#### Market Rate Study – Implementing Markets Reflective of SES and Demographics:

The Department's current provider reimbursement system predates EEC, and is based on a six-region rate scale that is frequently criticized for being inequitable across regions and types of care, and inadequate in relation to the market price of care. Ultimately, these problems have the unfortunate effect of reducing family access to high-quality care in many parts of the state.

The market prices that providers charge vary significantly within any given region. In Greater Boston, for example, the price of center-based infant care varies from approximately \$40 per day in some communities to nearly \$90 per day in others. The State maximum reimbursement rate for state contracts and vouchers remains fixed at \$59 per day, regardless of the local market price (Massachusetts 2006 Market Rate Survey).

In 2008, EEC will commission a new market rate study that will collect rate information at the town level and focus on establishing smaller reimbursement zones to reduce the disparity between the State maximum reimbursement rate and the local market rates.

#### Information Technology System:

Establishing a unified and comprehensive information technology system will facilitate EEC's efforts to build a high-quality early education and care system and align our quality efforts and rates. Earlier this year, the Information Technology Division (ITD) made a \$9.5 million commitment to fund the agency's three-year information technology strategic plan. ITD also released \$1.7 million this year, allowing EEC to begin implementation immediately. The strategic plan, which was developed by the Computer Sciences Corporation (CSC), will transform the existing technology infrastructure into a state-of-the-art system that will:

- Provide "one-stop-shopping" for families, with a single, user-friendly information portal for all EEC services and a unified enrollment process for all types of financial assistance;
- Streamline billing, payment, licensing and information-sharing processes for providers, and;
- Provide policymakers with tools to track the progress of children in early education and care programs and build connections across state agencies to share information and coordinate services for children.

The Department has hired a project manager to oversee the project, and is completing the bid process to select a company to build and implement the new system. The Department will continue to work closely with ITD to assure continued support and funding.

#### Alignment of Quality Enhancement Grants:

The Department currently administers several funding streams directly to programs that support quality enhancements at the classroom or program level. These include our UPK program (see below), \$9 million in grants to supplement and match federal Head Start funding, and our Preschool Direct Services funding (formerly known as CPC) which provides access to financial assistance for families at programs that meet a higher quality standard. Through the QRIS described above, EEC will be able to effectively align the varied quality standards and funding mechanisms for these and other funding streams at EEC. In addition to development of the QRIS, this work depends on an analysis of how current funding streams – both state and federal – work together to support and sustain quality. FY09 grant funding for each of these programs provides an opportunity to gather further data on program impact.

Progress on the above initiatives and policy efforts will establish the architecture necessary to better understand and link the quality of a program to the level of state funding they receive.

### **3. Universal Pre-Kindergarten**

With the generous support of the Legislature and Governor's Office, EEC has made significant progress in the second year of the Massachusetts Pilot Universal Pre-Kindergarten (UPK) Program. Through implementation of UPK, EEC seeks to ensure that all children have a high-quality early learning experience and enter school ready to learn and succeed.

#### UPK Pilot: Quality and Assessment Grants:

EEC is in the second year of administering UPK funds to programs – in both the public and private sectors – to maintain and improve the quality of their preschool services. The UPK Pilot includes two inter-related strategies: (1) quality grants to support programs that are already meeting a set of quality standards (detailed below) and, (2) assessment planning grants to help emerging programs as they work to meet these standards, positioning for participation in the UPK program in future years

The UPK Pilot Quality Standard includes:

- Accreditation from a nationally recognized organization;
- Well educated and skilled teachers in each classroom/setting;
- Use of curriculum guidelines aligned with the Massachusetts K-12 Curriculum Frameworks; and
- Use of appropriate child assessment tools to ensure children's educational progress and effective implementation of a developmentally appropriate curriculum.

*Quality Grants:* In FY07, EEC awarded quality grants to 131 programs with 187 classrooms, serving over 3,000 preschool children across all settings (i.e. private centers, public and private school programs, and family child care). These grants were renewed in FY08 to help maintain UPK level services. In addition, EEC has preliminarily awarded FY08 quality grants to an additional 109 additional programs with 140 classrooms, serving over 1,800 preschool children. This year EEC received applications for quality grants from more than 570 eligible classrooms serving 8,300 children, which would cost \$13.6 million to fully fund.

Quality grants are being used to:

- Improve teacher compensation;
- Strengthen teaching practice and professional development opportunities;
- Help programs understand and communicate children's progress;
- Support accreditation activities;
- Provide additional comprehensive services;
- Improve the classroom environment; and
- Provide or facilitate access to full-day full-year services for working families.

*Assessment Planning Grants:* In FY07, EEC awarded assessment planning grants to 60 agencies including more than 150 sites to help programs implement developmentally appropriate child assessment systems. EEC is in the process of awarding new assessment planning grants to agencies for FY08, and is developing a training and mentoring infrastructure to assist programs with this work.

#### Implementation Evaluation:

EEC is also overseeing an implementation evaluation of the UPK pilot that will provide valuable insights about the effectiveness of the UPK Pilot design, help refine grant requirements, and inform current policy and program development. This evaluation will also help the department develop future legislative recommendations for program improvement; findings will be available by June 30, 2008.

#### Budget Language Recommendations:

The level of detail in the UPK line item provided in the FY08 budget language, while helpful in providing EEC with overall policy direction, inadvertently limited some highly qualified family child care providers from participating in UPK. EEC is comfortable with language requiring the funding of high quality programs, but recommends omitting references to specific accrediting bodies or certifications (e.g., NAEYC, CDA, NEASC). The issue that should immediately be rectified is for a CDA credential or higher to be an acceptable criterion for UPK family child care eligibility versus the current language that only permits the CDA.

#### UPK Concept Paper:

To plan for the longer term implementation of UPK, EEC has also developed and continues to gather input on a UPK Concept Paper that summarizes the current state of preschool access, quality, and affordability and proposes key components of a comprehensive UPK system. The proposed framework includes three main strategies: (1) supporting program excellence, (2) increasing parent access, affordability, and awareness, and (3) building a thriving state system. The concept paper is available online at: [http://www.eec.state.ma.us/kr\\_upk.aspx](http://www.eec.state.ma.us/kr_upk.aspx).

#### **4. Supporting National Accreditation**

In 2008, EEC awarded a total of \$1,722,469 to Community Partnership for Children (CPC) lead agencies across the Commonwealth to support programs in achieving national accreditation (i.e., National Association for the Education of Young Children (NAEYC) for center-base programs and National Association for Family Child Care (NAFCC) for independent or system-affiliated family child care programs).

In the FY08 grant requirements, CPC programs were encouraged to collaborate with other CPC programs to maximize services in a larger geographic region. EEC also provided greater direction on the types of allowable accreditation activities to ensure greater consistency in service provision across the state. The following is brief summary of FY07 program impacts:

*NAEYC accreditation:*

- 1,189 programs across the state participated in CPC and accreditation activities; and 693 programs became accredited
- Funds were used to support fees, quality materials, consultation and mentoring

*NAFCC accreditation:*

- 180 programs across the state participated in CPC and accreditation activities; and 19 programs became accredited
- Funds were used to support fees, quality materials, consultation and mentoring

Programs were also able to access accreditation support through the Quality Improvement Grant Programs (funding through revenues from the "Invest in Children" special Massachusetts license plates). As of October 2007, a total of \$583,457 was awarded toward accreditation fees, materials, and consultation associated with accreditation. Finally, program participating in the UPK Classroom Quality Grants were allowed to use grant fund to support accreditation activities.

#### **5. Promoting Positive Behavioral and Mental Health in Early Education and Care**

Mental Health Consultation Services Grant:

For FY08, EEC issued Mental Health Consultation Services continuation grants to ten grantees serving more than 70 cities and towns. Through this continuation grant, EEC aims to accomplish the following objectives:

- Eliminate or reduce the number of suspensions and expulsions of children from EEC funded programs
- Enhance staff competencies to work with behaviorally challenged children, thereby benefitting all children enrolled in the program
- Strengthen parenting skills and parent involvement, and
- Promote collaboration for better access to services for children and families.



Grantees are expected to provide:

- On-site consultation by a mental health consultant to coach and mentor program staff
- Consultation to parents
- On-site observation and assessment of children's social/emotional and behavioral skills on a referral basis
- Developing individualized behavior plans for children
- Case management by coordinating services across agencies, and
- On-site crisis intervention support

From July to December of 2007, grantees provided more than 11,000 hours of consultation services for approximately 950 referred children from almost 500 classrooms or family child care homes. During FY08 EEC is tracking consultation service grantee data, including the number of suspensions and expulsions (terminations due to behavior), the frequency of types of behavioral issues, and strategies used to address them. Preliminary data as of December 2007 shows a decreased number of suspensions and expulsions in the programs receiving mental health consultation services.

The mid-year data also indicates that the most common emotional-behavioral issues in order of frequency (that grantees report as the primary problem for the child) are aggression, peer relations/social skills issues, oppositional behavior, and overactivity/attention issues. The most frequent strategies used to ameliorate these behaviors are direct consultation to child care staff, modeling of behavior management strategies, and consultation to the child's family. Staff training appears to be particularly useful to help support children's peer relations/social skills needs.

#### Comprehensive Mental Health in Child Care (CMHCC) pilot programs:

In collaboration with MassHealth/MPHP, EEC has worked to connect early education and care providers with mental health clinics to locate clinicians on-site at child care programs that have supportive child care contracts with EEC. The mental health clinicians provide support and training to staff at the child care program and link families with needed clinical services through the partnering clinic. Goals include:

- Reducing expulsions or suspensions of children due to behavioral issues
- Preventing repeat psychiatric hospitalizations of children
- Improving the quality of child, parent, and family relationships, and
- Reducing the risk factors that impact children's emotional development and their acquisition of knowledge and skills necessary for success in school

From July to December of 2007, almost 400 children received individual services through the CMHCC program.

#### Mental Health Consultation Survey:

In the spring of 2007, EEC hired Glenwood Research to conduct a survey to gather data on behavioral and mental health services provided to early education programs in Massachusetts. A total of 176 behavioral/mental health specialists and 185 early education providers completed the survey.

Invitations to participate in the online survey were sent to programs subscribed to the EEC Commissioner's email list-serve and to Head Start directors. Invitations were also

sent to a variety of known mental health consultants including those that had received training through the Massachusetts Department of Public Health, and consultants serving EEC grant funded programs. The results of the survey, while significant, should not be interpreted as representative of all early care and education programs or Mental Health Consultants in Massachusetts.

Key findings from the survey relate to the level of access to mental health services in early education programs, the mental health specialists and the kinds of service they provide, challenges and successes in providing mental health services, and rates of suspension and expulsion in surveyed programs.

*Access:* It appears that most of the survey respondents have some access to services. Yet, of the respondents, 43% indicated that services were not sufficient to meet the needs of their program. Programs most often receive only about ten hours of consultation per month. It is difficult to access certain kinds of services, such as intensive services for young children, and services in languages other than English.

*Mental Health Specialists and Services:* The mental health specialists who responded to the survey were a varied group of professionals, but they overwhelmingly had a high level of education and experience. They often work across multiple types of programs and provide services and supports directly to children, to families, as well as to program staff, but they spend less time on prevention activities such as staff and parent training.

*Challenges and Successes:* The most significant barriers to effectively working with children with mental or behavioral health needs specialists identified were:

- Insufficient time to do work effectively
- Insufficient staff in classrooms to implement recommended practices
- Need for engagement/support from parents to implement recommended practices
- Not enough mental health services to refer children to, and
- Lack of funding for child care center to make recommended changes

Language and cultural differences may also pose barriers to service provision. Ninety-five percent of programs serve an ethnically and linguistically diverse population, while only 15% of specialists are bilingual and 8% did not self-identify as white.

Funding mechanisms are varied and often piecemeal. Twenty-six percent of responding programs were unable to allocate money towards their mental health services and specialists were unlikely to bill a third party for mental health services due to various barriers.

Survey findings reflected current literature, which identifies the integration of a mental health consultant into the day-to-day functioning of a program as a best practice. The survey indicated that programs that dedicated funding toward their mental health services:

- Have more active mental health specialists
- Gain quicker access to needed mental health services, and
- Reported that their consultant made more of a difference in changing problem behaviors in the child care environment

The mental health specialists were reported to be most effective in changing externalizing (or “acting out”) behavior including aggression, temper tantrums, and lack of pro-social behavior – the kinds of behaviors which most often lead to expulsion from early education programs.

*Expulsion and Suspension:* Thirty-two percent of programs responding to the survey indicated that they had expelled at least one child in the past year due to behavioral issues. The rate of expulsion in this particular surveyed sample was 3.8 per 1,000 children – as compared with the oft-cited study which estimated Massachusetts rate of expulsion to be 11.15 per 1,000 children (Gilliam, 2005). While the results of the survey should not be considered representative of the state, it is worth noting that most of the surveyed programs had some level of access to mental health consultation, and may therefore have a lower rate of expulsion.

For-profit centers and larger child care programs (more than 50 children) in the survey had higher rates of expulsion. Programs reported that they referred 62% of children that were being expelled to other early care and education programs. Thus, 38% of the time, the child was *not* referred to another program. Respondents noted that the low number of programs that offer intensive mental health treatment for young children poses a barrier to referrals.

Finally, the suspension rate in this particular sample was 5.1 per 1,000 children. Again, for-profit centers and larger programs had a higher rate of suspending children. It also appeared that programs with *more* access to mental health consultation had higher rates of suspension. Suspension can be part of a mental health strategy, to allow teachers time to form and implement a successful strategy for including the child in the classroom. It can, at the least, be considered a preferable alternative to expelling a child.

## **Conclusion**

As this report illustrates, the past year has been one of major positive progress on a number of key strategic initiatives. With a growing record of accomplishment, the Department looks forward to year three of its existence, and the important work of creating a comprehensive and coordinated system focused on the needs of children and families, with a great deal of enthusiasm and renewed dedication to this important work.

For further information on the contents of this report, or on any of the work of the Department of Early Education and Care, please call 617-988-6600.